

Securities Division

PO Box 9033 Olympia WA 98507-9033 360-902-8760 www.wa.gov/dfi/securities

APPLICATION FOR A FRANCHISE BROKER LICENSE INITIAL APPLICATION FEE \$50.00 RENEWAL FEE \$25.00 (Make Remittance Payable to State Treasurer)					
NAME (AF	PPLICANT) LAST	FIRST (If Individual)	M.I. (if Indiv	ridual)	
APPLICAI	NT ADDRESS				
CITY			STATE/PR	OVIDENCE	ZIP
	TE (Month/Day/Year) (if Individual) E AND DATE OF ATION	PHONE NO.	E-MAIL AD	E-MAIL ADDRESS	
NAME AND	ADDRESS AND TELEPHONE NUMBER OF PERSON TO V	L VHOM COMMUNICATIONS REGARDING THIS APPLIC.	ATION SHOULD BE DIRECTED:		
NAME:					
ADDRESS:					
CITY:		STATE/PROVIDENCE:	ZIP:	Pi	HONE:
1.	No person shall act as a franchise broker in this state until licensed by the Securities Division. Attach hereto are the following exhibits: a. □ Check □ Money Order □ Bank Draft in the amount of \$ payable to the State Treasurer. b. An irrevocable consent to service of process pursuant to RCW 19.100.160. c. Broker and Principal disclosure page. d. Broker and Principal employment history. e. A BALANCE SHEET PREPARED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES AND AS OF A DATE WITHIN 90 DAYS OF THE APPLICATION.				
2.	FOR AMENDMENT AND RENEWAL PURPOSES If there are any material changes, a new application should be promptly submitted. No fee required for amendment.				
3.	FRANCHISE BROKER LICENSES EXPIRE ANNUALLY AT THE END OF THE CALENDAR YEAR. An application for a franchise broker license should be submitted approximately fifteen business days prior to the end of the year with the renewal fee of \$25.00.				
The un	dersigned applicant certifies that t	he information and responses m	nade in this application are	e true.	
	Date		Broker or Pr	incipal Sign Here	
			Print	Name/Title	

^{**}DFI takes steps to protect the confidentiality of personal information, to the extent permitted by law. However, all information collected by DFI becomes a public record and may be subject to inspection and copying by the public, unless an exemption or other protection in law exists. A copy of our privacy policy is available upon request.

POWER OF ATTORNEY FOR CONSENT TO SERVE

KNOW ALL PERSONS BY THESE PRESENTS: That ___ a company, corporation, association, joint stock company, co-partnership, trustee or individual (strike words not applicable), _____, in accordance with the provisions of Chapter 19.100 RCW and particularly RCW 19.100.160, Franchise Investment Act of Washington, does hereby make and give this irrevocable written consent that in suits, proceedings and actions arising out of our founded upon the sale of franchises within the State of Washington, the service on the Administrator of Securities of any notice, process or pleading therein shall be as valid and binding as if due service had been made on said entity or individual. IN WITNESS WHEREOF, the said _______, a company, corporation, association, joint stock company, co-partnership, trustee, individual, (strike words not applicable), has hereunto affixed signatures thereof authorizing the same and has caused these presents to be executed by the President and Secretary, and authenticated by the corporate seal thereof, the _____ day of ______, A.D. 20____, in accordance with the resolution of the Board of Directors (trustees or managers of the corporation or association) thereof authorizing the same. (CORPORATE SEAL) (Name or Signature of Applicant) (If a co-partnership or company, all members thereof must sign) It is requested that a copy of any notice, process or pleading served hereunder be mailed to: ADDRESS CORPORATE ACKNOWLEDGMENT .SS On this _____ day of _____, A.D. 20 ____, before me personally appeared _____ vice-president, secretary, or other title of the Corporation whose name is subscribed to the foregoing instrument, that the seal affixed thereto is the seal of said corporation, and that the instrument was signed and sealed on behalf of said corporation by authority of its Board of Directors, and the _____ and acknowledged to me that they executed the same as their free and voluntary act and deed of such corporation, for the uses and purposes therein set forth. Given under my hand and seal of the office the day and year last above written. (OFFICIAL SEAL) Notary Public in and for the State of Residing in _____ INDIVIDUAL ACKNOWLEDGMENT State of _____ On this _____ day of _____, A.D. 20 ____, before me personally appeared ___ to me known to the identical person...named in and who executed the foregoing instrument, and acknowledged to me that _____ executed the same as ______ free and voluntary act and deed for the uses and purposes herein set forth Given under my hand and seal the day and year last above written. (OFFICIAL SEAL) Notary Public in and for the State of _____ Residing in _____

BROKER AND PRINCIPAL LITIGATION DISCLOSURE

1.	Has the broker or any of the broker's principals, officers or directors ever been convicted, within the past five years, of any misdemeanor involving a franchise or any felony involving moral turpitude?
2.	Has the broker or any of the broker's principals, officers or directors ever been permanently or temporarily enjoined from engaging in or continuing any aspect of the franchise industry?
3.	Has the broker or any of the broker's principals, officers or directors ever been the subject of an order or the director denying, suspending, or revoking registration as a franchise broker?
4.	Has the broker or any of the broker's principals, officers or directors ever been found by any court, administrative body or arbitrator/arbitration panel to have engaged in dishonest or unethical practices in the franchise industry?
5.	Has the broker or any of the broker's principals, officers or directors ever been the subject of an insolvency or bankruptcy proceeding?
If th	e answer to any of the above questions is "yes", give all pertinent details, including names, dates, case numbers and a summary of allegations and findings in the space provided below. Attach additional sheets as necessary.

Give previous residence, employment, or occupation of the brokers, broker's principals, officers and/or directors for five years immediately preceding the date of this application and account with particulars for any lapse in employment as required by the following schedule, listing the most recent employment first.

schedule, listing the most recent employment first.							
FROM MO YR	FROM MO YR	APPLICANT'S ADDRESS DURING PREVIOUS PERIODS NO CITY STATE	EMPLOYER'S NAME AND ADDRESS NAME NO CITY STATE	EMPLOYER'S LINE OF BUSINESS	EMPLOYMENT OR POSITION HELD	IF NOT EMPLOYED BY OTHERS GIVE OCCUPATION	DESCRIBE TYPE OF SECURITIES, REAL ESTATE OR FRANCHISE SOLD IF ANY

APPOINTMENT OF A FRANCHISE BROKER BY FRANCHISOR OR SUBFRANCHISOR

(To be executed by the principal of the Franchisor or Sub Franchisor)

The undersigned Principal hereby appoints as a Franchise Broker to represent and act for and in behalf of the undersigned	ed;
Has diligently investigated the above named and believes the application form	n submitted herewith to be truthful in its entirety;
Assumes full responsibility for all acts of the above named within the scope of	the agency relationship.
	NAME OF FRANCHISE - PLEASE PRINT
Ву	/SIGNATURE OF PRINCIPAL OF FRANCHISOR OR SUB FRANCHISOR
	PRINT NAME/TITLE
	NAME OF FRANCHISOR
	ADDRESS
	Telephone Number ()

THIS FORM MUST BE COMPLETED BY EACH FRANCHISOR OR SUB FRANCHISOR A FRANCHISE BROKER WILL BE REPRESENTING.